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APPLICANTS

Rex E. Lowther, Palm Bay, FL;

Gregg D. Croft, Palm Bay, FL;
 Yiqun Lin, Melbourne, FL; Robert Lomenic, Palm Bay, FL;
 James P. Furino JR., Melbourne, FL;
 Joseph A. Czagas, Palm Bay, FL;

** CONTINUING DATA ***** *QW*

** FOREIGN APPLICATIONS ***** *Am*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>W. Palm</i> Examiner's Signature Initials	STATE OR COUNTRY FL	SHEETS DRAWING 5	TOTAL CLAIMS <i>1047</i>	INDEPENDENT CLAIMS <i>47</i>
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ADDRESS

Fogg and Associates, LLC
 P.O. Box 581339
 Minneapolis, MN
 55458-1339

TITLE

Line modeling tool

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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